

George E. Wahlen Veterans Affairs Salt Lake City Health Care System

**2016 – 2017
Psychology Internship Program**





Psychology Internship Program

George E. Wahlen Veterans Affairs Salt Lake City Health Care System
Psychology Service (116B)
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Application Due Date: November 4, 2015 (noon, MST)
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TABLE OF CONTENTS

<u>Letter from the Training Director</u>	<u>1</u>
<u>Psychology Internship Program</u>	<u>3</u>
<u>Training Philosophy</u>	<u>3</u>
<u>Training Structure</u>	<u>3</u>
<u>Goals for Internship</u>	<u>4</u>
<u>Major Rotations</u>	<u>6-11</u>
<u>Minor Rotations</u>	<u>12-13</u>
<u>Supervision</u>	<u>13</u>
<u>Evaluation</u>	<u>14</u>
<u>Research</u>	<u>15</u>
<u>Didactics and Seminars</u>	<u>15</u>
<u>Stipend, benefits, and intern resources</u>	<u>16</u>
<u>Accreditation Status</u>	<u>17</u>
<u>Commitment to Diversity</u>	<u>17</u>
<u>Applying to the Doctoral Salt Lake VA Internship Program</u>	<u>18</u>
<u>About Salt Lake City and Utah</u>	<u>19</u>
<u>Training Staff</u>	<u>24</u>
<u>FAQ about living in Salt Lake City</u>	<u>33</u>

Dear Internship Applicant:

Thank *you* for your interest in the APA Accredited*, Clinical Psychology Internship Program at the George E. Wahlen Department of Veterans Affairs Salt Lake City Health Care System (VASLCHCS). Internship year can be one of the most exciting, challenging, and meaningful experiences in your development as a professional psychologist and we are excited to participate in the process. We believe that one of the greatest strengths of our program is our commitment to facilitating the "transition from student to professional." As such, we take a developmental approach to clinical training and supervision. We pride ourselves on creating a friendly, nurturing environment in which trainees develop the foundational and functional competencies to perform across a wide range of health care settings. This emphasis has proven to create an atmosphere conducive for professional growth and personal development.

VASLCHCS has a long history of clinical psychology training. Interns have been training here since 1952 and we have had over 500 interns graduate from our program as well-prepared psychologists ready for the next step in their career. We have been continuously accredited by APA* since 1979 and were recently re-accredited until 2020. As an equal opportunity training program, we value diversity and encourage all qualified candidates, regardless of racial, ethnic, religious, sexual orientation, disability, or other minority status. VASLCHCS has had the good fortune of significantly increasing our psychology staff, going from a dozen psychologists a few years ago, to over 40 staff psychologists.

Our training program is committed to providing high-quality *generalist* education that emphasizes the interdependence between the application and science of psychology. This approach is ideal for applicants with a strong clinical and science background who are interested in dedicating a year to round out their clinical skills. The VASLCHCS internship is uniquely able to provide a breadth of training experiences that include a number of rotations spanning traditional mental health and health psychology. Our staff consists of over 40 psychologists, the majority of whom are directly involved in the internship training program. In addition to the internship program, we also train psychology practicum students and post-doctoral fellows. We have five APA accredited postdoctoral positions in Clinical Psychology (special emphasis areas: two in PTSD, two in Behavioral Health, and one in Geriatric Behavioral Health). I hope this brochure reflects our enthusiasm for training, with the professional development of interns being our highest priority. It is difficult to represent the "feel" or "character" of a training program in writing. So, please do not hesitate to contact me directly with any questions about our program. We wish you the best during this exciting time in your training.

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*Questions related to programs' accredited status should be directed to the Commission on Accreditation: American Psychological Association, Office of Program Consultation and Accreditation, 750 1st St, NE, Washington, DC 20002, tel (202)336-5979, web: apa.org/ed.accreditation, email: apaaccred@apa.org

GEORGE E. WAHLEN DEPARTMENT OF VETERANS AFFAIRS SALT LAKE CITY HEALTH CARE SYSTEM

The George E. Wahlen Department of Veterans Affairs Salt Lake City Health Care System (VASLCHCS) is located on an 81-acre campus adjacent to the University of Utah and Salt Lake City Veterans Affairs Regional Office. During fiscal year 2013, the VASLCHCS served 51,701 veterans in over 635,000 outpatient visits. There were over 5,600 inpatient stays, almost half of which were mental health related admissions. The VASLCHCS is part of VA Network (VISN) 19, which encompasses the largest geographic area in the 48 contiguous states, almost 125,000 miles of the American West. VISN 19 serves an area covering the entire state of Utah, sections of Montana, Wyoming and Colorado, and portions of Idaho and Nevada. We have a total of 11 satellite service locations (Community Based Outpatient Clinics-CBOCs and Outreach Clinics) in remote areas of Utah, Idaho and Nevada.



VASLCHCS is a mid-sized affiliated tertiary care facility. There are 121 beds providing a full range of patient care services. Comprehensive health care is provided through primary care and tertiary care in areas of medicine, surgery, psychiatry, physical medicine and rehabilitation, neurology, oncology, dentistry, geriatrics, and extended care. In terms of the veterans we serve, their demographics, 94% of the veterans served by VASLCHCS are male; 6% are female. Ninety-one percent identify as Euro-American, 5% as Latino/a, 2% as African-American, less than 1% as Asian American, and less than 1% as Native American. The socioeconomic statuses of the Veterans vary widely. VASLCHCS employs over 2200 employees, almost a third of the employees are also veterans.

VASLCHCS is closely affiliated with the University Of Utah School Of Medicine, located less than one mile away. We do provide training opportunities for interns in the University of Utah Medical Center, in the department of Rehabilitation Psychology. In addition to this longstanding affiliation, VASLCHCS maintains active affiliations with several other Utah colleges and universities and serves as a training site for students, interns, and residents from a variety of health care professions. VASLCHCS is also home to the Salt Lake City Geriatric Research, Education, and Clinical Center (GRECC), Mental Illness Research, Education, and Clinical Center (MIRECC), and the VHA Office of Rural Health Resource Center (RHRC). Finally, VASLCHCS serves as the location for the VHA funded Mental Health Strategic Health Care Group Informatics Section.

PSYCHOLOGY INTERNSHIP PROGRAM

The Psychology Internship program funds now funds 8 internship positions, as of 2015. The program is a 12-month, full-time appointment. In general, interns work 40 to 45 hours per week, depending on the rotations they select. All interns complete at least a total of 2080 hours of training. The usual tour of duty is 8:00 – 4:30PM, although some training experiences may involve a different one (e.g., 12:30PM – 9:00PM) due to scheduled activities on that rotation (e.g., evening therapy groups, weekend post-deployment health assessments, etc). Although some rotations will offer experiences outside of the usual tour of duty, there are no mandatory after-hour expectations. Interns are provided the full parameters and requirements of each rotation during the first week of orientation. We truly support interns in learning to balance work and life. Interns are free to choose rotations that work well for their lives and do have the information necessary to make informed decisions.

TRAINING PHILOSOPHY

The Psychology Internship Program ascribes to the practitioner-scholar model of training. As such, the goal of the internship program is to train psychologists to function in an informed, competent, independent, and ethical manner across a wide range of healthcare settings. The program's rotation structure allows for both breadth and depth of clinical experiences, as well as exposure to a variety of intervention approaches and professional issues. Interns are here for training and professional development, not service delivery. Accordingly, didactics, training seminars, and any other educational activities take priority in an intern's schedule.

Utah is one of the few states that does not require any post-degree (Ph.D. or Psy.D.) clinical experience or hours. Essentially, upon completion of internship, interns are eligible to sit for licensure as a Psychologist in the State of Utah. Given this, we have a heightened responsibility to ensure the competence of those who complete our internship program. Our program's main goal is to transition the intern from student to professional. Upon successful completion of the internship program, interns will be capable of functioning as entry-level psychologists within most healthcare settings.

TRAINING STRUCTURE

Generally, interns select their own rotations at VASLCHCS; rotation selection as a cohort is considered part of our training experience. During orientation, we provide interns with information, support and guidance about the available rotations: including scheduling parameters, recommended sequences, and individualized rotation suggestions based on interns' prior training and career goals. This is a process that has worked well every year, what varies is how long the process takes for the intern cohort to be satisfied with the results. There have been training cohorts that arrived at consensus within a few hours and other years where it has taken multiple days. The process takes as long as it needs to take. The fail-safe is that if an intern cohort truly cannot come to a consensus, the TD will select their rotations for them.

We insist that interns keep in mind the philosophy that this internship is based on **generalist training**. We want interns to select rotations in both medical *and* psychiatric settings. During

the first week of orientation, interns are provided feedback based on their training to date and also with an eye towards their future career plans. The training director provides recommendations of rotations that interns might want to consider, such as: 1) remedying any gaps in training; 2) encouraging further training in areas of strong interest or intended career path; 3) that the overall internship year looks well balanced; 4) practical parameters (i.e., such as which rotations have meetings or required functions on certain days, etc); 5) that internship is one of their last supervised settings and in which to risk and try something new.

In order to provide training with both breadth and depth of clinical experience, interns have two concomitant rotations at any given time (Major and Minor). Interns select *four* Major Rotations (each three months in duration) and all complete two Minor Rotations (each six months in duration) during the training year. The Major Rotation selection is where an intern can have considerable choice in their internship experience, selecting four rotations from a larger pool of available rotations. We generally offer anywhere from eight to twelve quality training rotations depending on supervisor availability and staffing. *All* interns will complete two additional rotations (Minor Rotations): psychotherapy and psychological assessment. The six month experiences are not optional, however, interns do have input on who their supervisor is for those Minor Rotations. The Minor Rotation in psychotherapy can focus on a number of mental health needs and can include individual mental health counseling, couples therapy and group modalities. In addition to the traditional assessment on the assessment Minor Rotation, each intern will complete an eight-week intensive experience in brief geriatric assessment. This experience involves one full day of weekly interdisciplinary assessment of age-related neurocognitive disorders.

Interns devote 50+% of their time to the Major Rotation (18-22 hours); 25-30% to the Minor Rotation (15 hours); and 15-20% to seminars, meetings, and other training activities. Interns are able to choose almost *any* combination of rotations provided that their training schedules ascribe to our generalist philosophy. There are no mandatory major rotations, though interns are encouraged to select training experiences in both medical and psychiatric settings to remedy any gaps in their preparation. Interns wanting to specialize will have opportunities to author their training plan to enhance their applications for post-doctoral work, however interns will be expected to select a range of training experiences that meet the *generalist* training model.

The following are just two examples of a possible internship year at the SLCVA:

Major Rotation 1	Major Rotation 2	Major Rotation 3	Major Rotation 4
Polytrauma	Inpatient Psych.	Medical Psychology	Addictions
Minor Rotation 1		Minor Rotation 2	
Psychological Assessment		General Outpatient Mental Health	
Seminars, meetings, and other training activities			

Major Rotation 1	Major Rotation 2	Major Rotation 3	Major Rotation 4
Physical Medicine & Rehabilitation	Medical Psychology	Inpatient Psych	Geropsychology
Minor Rotation 1		Minor Rotation 2	
PTSD Clinical Team		Psychology Assessment	
Seminars, meetings, and other training activities			

GOALS FOR INTERNSHIP

The primary goal of the Psychology Internship Program is to train broadly-based, entry-level psychologists in evidence-based assessment, treatment, and consultation skills to work with veterans and their families. Clinical training experiences are complemented with didactic activities designed to expose interns to scientific and professional issues in the field of psychology. Essentially, upon internship completion, we are saying they can function independently within their scope of competence and expected level of development for an entry-level psychologist in a healthcare setting.

Internship goals include the following:

Therapeutic Intervention – Interns will be able to work effectively with diverse populations and effectively work with individuals, groups, and families. Interns will demonstrate appropriate intervention skills to a range of presenting problems and treatment concerns. These interventions will be able to be judiciously adapted for the maximum therapeutic gain.

Assessment and Evaluation – Interns will be able to appropriately assess, evaluate and conceptualize a broad range of patients, including those with complex presentations and complicated co-morbidities. Selection and use of assessment tools and/or evaluation methods should be appropriate to the clinical needs of the patient, the clinical setting, and responsive to the needs of requesting professionals. Assessment will be practiced in a culturally competent manner, and conducted with an awareness of current ethical and professional standards. The intern will have the opportunity to demonstrate advanced skill in assessment by providing consultation and/or instruction to other providers. Interns will develop skills in evaluating treatment outcomes.

Consultation and Interdisciplinary Systems – Interns will demonstrate the ability to skillfully and effectively interact in interdisciplinary clinical settings by working with other professionals to incorporate psychological information into team planning and implementation. Interns will be able to handle difficult communications with individuals and teams of other disciplines and maintain good working relationships across time. Interns will demonstrate effective consultation skills with other professionals, and provide counsel regarding clinical matters in areas of their expertise.

Professional Identity Development – Interns will develop and demonstrate a consolidated sense of professional identity that is self-directed and conducted at a higher level of self-efficacy as compared to internship entry. Interns will be able to demonstrate preparedness to function successfully as independent practitioners/scholars appropriate for entry into professional clinical practice. Interns will be able to practice psychology reflexively, understanding the need for self-care, self-monitoring, self-regulation, and consultation when needed.

Science of Psychology – Interns will be able to demonstrate the ability to independently apply core psychological knowledge, skills, and attitudes to their professional practice. Interns will develop knowledge, skills and attitudes regarding complex and intersecting dimensions of diversity (e.g., age, culture, ethnicity, SES, religious preference, sexual orientation, disability) in their professional work. Most importantly, interns will demonstrate the ability to integrate science into their practice (e.g., such as basing clinical decisions on scientific literature, formulating and implementing testable hypotheses in clinical care, presenting research findings, contributing to research, etc.).

Psychological Systems – Interns will demonstrate their skills in organization, management, and administration. Interns will improve the systems in which they inhabit (i.e., developing innovative programs or clinical services, program evaluation, demonstrating leadership skills appropriate to their developmental level). Interns will demonstrate an emerging awareness of the complexities of the supervision role and will provide leadership to junior providers.

MAJOR ROTATIONS

Currently we offer major rotations in: Behavioral Health/Primary Care, Addictions (outpatient), Medical Psychology, Home-Based Primary Care, Rehabilitation, Polytrauma, VITAL, SARRTP (residential substance abuse), and Health Promotion/Disease Prevention. For the 2016-2017 training year, we expect to offer new rotations in Integrative Health and Pain Medicine/Palliative Care.

Behavioral Health Service/Primary Care

The Behavioral Health Service provides mental health primary care services. This rotation is an integrated position, in which the intern works collaboratively with the primary care team (e.g., attending physicians, residents, interns, NPs, PAs, nurse case managers) to enhance treatment of medical and psychological problems presented by clinic patients. The interdisciplinary nature of the rotation requires interns to offer recommendations/feedback, care coordination, and support for veterans' mental healthcare needs to the team of clinicians and veteran patients. Veterans often present with a range of complex psychological and physical health concerns. These health complaints can include: chronic pain syndromes, coping with chronic illness, PTSD, adjustment disorders, depression, anxiety disorders, concerns about adherence, and eating/weight disorders are presenting issues that are common to this population.

Typical activities for interns on this rotation include:

- Primary Care Consultation/Triage (involving screening, assessment, diagnosis, and treatment of mental health conditions, as well as referrals to specialty mental health when appropriate).

- Brief Outpatient Therapy (e.g., adjustment to chronic illness, current life stressors, sleep disturbance, grief, and mild depression/anxiety).
- Behavioral Health Clinic (staffed by behavioral health psychiatrist).
- Groups and classes run through the primary care clinic such as the MOVE Program Weight Management Class, Diabetes Shared Medical Appointment, or Smoking Cessations Groups.
- Behavioral Health Team Meetings.

Geropsychology

The Geropsychology rotation is sponsored through the VASLCHCS Geriatric Research, Education, and Clinical Center (GRECC). This center is one of twenty-two specially funded national centers of excellence in aging and care for older veterans. The mission of the GRECC is to conduct geriatric research, educate providers and the public, and develop state of the art clinical demonstration projects to improve the quality of care of elderly veterans. The GRECC is a local, regional, and national resource for geriatric education and training and integration of new and existing geriatric knowledge and skills into clinical practice.

On this rotation, interns will develop skills and understanding in by working in various clinics:

- Diagnosis and treatment of common geriatric mental health diagnoses.
- How common geriatric medical diagnoses and medications may influence mental status.
- Coping with chronic illness and psychological interventions to improve quality of life.
- The purpose of interdisciplinary care in the treatment of geriatric patients and the different roles psychologists can play on an interdisciplinary team.
- Important psychosocial issues common to geriatric populations.

Home Based Primary Care Program

The Home Based Primary Care (HBPC) Program is an interdisciplinary outpatient service that provides comprehensive, interdisciplinary primary care in the homes of veterans with complex medical, social, and behavioral conditions for whom routine clinic-based care is ineffective.

Responsibilities of the intern on this team include:

- Screening, assessment, diagnosis, and treatment of Axis I conditions.
- Assessing and providing treatments for subclinical symptoms of dysphoria and anxiety, bereavement, adjustment difficulties, and excessive drug use.
- Providing services to caregivers of veterans served by HBPC.
- Performing capacity assessments when there are questions about a patient's ability to make medical decisions, perform other specific functions, or live independently.
- Represent psychology during interdisciplinary team meetings.

Geriatric Outpatient Clinics

These weekly primary care clinics serve geriatric patients and are staffed by two geriatricians, a geriatric fellow, medical residents, and medical students, in addition to the psychology intern. Psychology interns serve in a consult/liaison role conducting brief psychological and cognitive assessments of clinic patients as part of the primary care appointment. Interns may also consult

with the team about patient issues or offer instruction to staff on psychological issues. Time-limited interventions may also be incorporated.

Health Promotion/Disease Prevention (HPDP)

This rotation offers experience in three domains: clinical care, training and clinician coaching, and administrative processes. These activities are conducted within local divisions of the National Center for Health Promotion and Disease Prevention (NCP) and the Office of Patient Centered Care and Cultural Transformation (OPCC).

The National Center for Health Promotion and Disease Prevention (NCP) strives to improve the quality of life for Veterans by providing VA clinicians with evidence-based health promotion and disease prevention practices. The primary focus is advocating for health promotion/disease prevention, providing education, advising VHA leadership on evidence-based health promotion and disease prevention policy, and consulting with providers to enhance health, well-being, and quality of life for Veterans.

The Office of Patient Centered Care and Cultural Transformation was established in 2011 to develop personal, patient-centered models of care for Veterans. The primary focus is on identifying and implementing new models of care across the VA. This includes an emphasis on treating patients as a whole and with a mind toward prevention as well as integration of complementary and alternative medicines.

Intern Involvement

Dr. Varra's position is unique in that she is 75% administrative time and 25% clinical time and reports to one of the hospital's Associate Directors rather than being part of the Mental Health Service. While there is a significant amount of Behavioral Health related clinical work, interns will also engage in program development, clinician training, and administrative process. Psychology interns will have significant input into focused activities but will be involved in all aspects of the program. Specific expectations include:

Clinical Care

- Co-facilitation of health promotion/disease prevention groups
 - Includes smoking cessation group, shared medical appointment (SMA for diabetes) group, and MOVE! Program (weight loss) groups
- Provide pager coverage for 1 morning a week for behavioral medicine
 - Includes brief assessment or intervention for primary care patients. May also include targeted short term treatment for a specific disorders or more detailed assessment for diagnosis.
- Provide individual smoking cessation treatment

Training and Clinician Coaching

- Co-facilitation of motivational interviewing training
- Co-facilitation of TEACH for Success training
- Consultation to primary care teams concerning MI and TEACH skills

Administrative Processes

- Participation in HPDP committee and tobacco cessation workgroup meetings

- Participation in NCP and OPCC national conference calls
- Participation in PACT and Transformational Coaching activities

Inpatient Psychiatry Unit (IPU)

This 21-bed Inpatient Psychiatry program delivers crisis-oriented services to patients with a wide range of presenting problems. The patient population represents all adult age groups and a variety of diagnoses. Interns are assigned to one of three multidisciplinary treatment teams, each of which develops treatment plans in cooperation with the patients. Common activities for the intern include: individual therapy, comprehensive psychological assessment, and process and psychoeducational groups.

The Inpatient Psychiatry Unit has a strong commitment to training. Students from each of the major disciplines (e.g., Psychiatry, Psychology, Social Work, and Nursing) rotate through the unit. Unless interns have considerable inpatient psychiatry experience, we encourage interns to consider this rotation as the supervised experience is something few interns have had in practicum setting. Psychology interns play an active role on the unit and have considerable freedom in choosing diagnostic and treatment activities that fit their interests. These options include:

- Administration and interpretation of a broad spectrum of psychological assessment instruments, including personality (both objective and projective), and neuropsychological screening instruments.
- Individual psychotherapy.
- Yalom-based group therapy.
- Interdisciplinary Team consultation.
- In-service training programs from other disciplines.
- Observation of psychiatric procedures such as electroconvulsive therapy.

Integrative Health

The Integrative Health rotation is currently under development and we expect to be able to offer it to interns for the 2016-2017 training year. At a minimum, supervisors anticipate offering training in mindfulness, ACT, and health psychology broadly.

Medical Psychology

Interns can expect to provide inpatient medical consultation, provide pain treatment through primary care and women's clinic. The rotation will consist of a combination of the following experiences:

- Inpatient Mental Health Consult Team
- Women's Clinic Chronic Pain Program

Inpatient Mental Health Consult/Liaison Team (MH Consult)

The Mental Health Consult Team is an interdisciplinary team consisting of Psychology, Psychiatry, Clinical Pharmacy and trainees from several other rotating mental health and medical

disciplines. This team provides mental health services to patients within inpatient medical settings, including Acute Medicine, Surgery, Neurology, Telemetry, Dialysis, and Intensive Care Units by utilizing a consultation/liaison model. Common referral issues include medical decision-making capacity, cognitive functioning, adjustment to illness, evaluation/management of psychiatric symptoms (e.g., depression, anxiety, psychosis), and substance abuse/detoxification. Interns have several responsibilities, including:

- Participation in patient-centered rounds.
- Conducting diagnostic evaluations.
- Administration of neuropsychological screenings.
- Providing brief psychotherapy.
- Conducting transplant evaluations.

Women's Clinic Pain Management Program

Fellows will work collaboratively with Women's Clinic to implement a pain management program. Fellows will be involved in co-leading an orientation class in which a holistic approach to pain management will be discussed. Fellows will conduct evaluations for pain patients as needed and implement a 6-week CBT for chronic pain group. Research opportunities are available upon request.

Pain & Palliative Care Rotation

VASLCHCS will offer a psychology rotation in Pain Medicine and Palliative Care next year, stay tuned for further program development in this area.

Polytrauma and Caregiver Support

This rotation affords interns the opportunity to work in two unique, but overlapping clinical teams: the Polytrauma team and the Caregiver Support team. The Polytrauma interdisciplinary team assesses and coordinates care for OEF/OIF Veterans with ongoing concerns related to TBI and/or polytrauma usually associated with blast exposure. This is a fast-paced clinic where an intern can expect to work with the team to rapidly collect data and initiate comprehensive treatment plans. The Caregiver team identifies and supports family caregivers of veterans who require continuous assistance due to post-9/11 injuries. The psychologist works with an interdisciplinary team to assess caregiving needs related to both physical and mental health concerns. Interns on the Polytrauma and Caregiver rotation will become well-versed in brief psychological and neuropsychological screening as well as measures of effort and response bias. Opportunities also exist to provide group and individual interventions, program development, and supervision of students.

Rehabilitation Psychology

The University of Utah and George E. Wahlen Salt Lake City VA Health Care System - Rehabilitation Psychology Predoctoral Internship Rotation is an off-site, 3-month rotation at our affiliate: University of Utah School of Medicine in the Division of Physical Medicine & Rehabilitation. The University of Utah Hospital Inpatient Medical Rehabilitation Unit is a 37-bed inpatient unit providing acute rehabilitation services for individuals with brain injury, stroke, spinal cord injury, burn injury, amputation, conversion/somatoform disorder, and other severe

injuries and medical conditions. The inpatient service is divided into three primary CARF accredited treatment teams specializing in brain injury, stroke, and spinal cord injury. Patients are provided with specialized and individualized rehabilitation services involving rehabilitation medicine, physical therapy, occupational therapy, speech and language therapy, rehabilitation psychology, and respiratory therapy.

During their 3-month rotations, interns will develop foundational experiences and exposure to the practice of rehabilitation psychology, including an introduction to clinical skills necessary to provide competent assessment, treatment, and consultation in rehabilitation psychology specialty practice. Specific areas of development and intern responsibilities include:

- Assessment and treatment of psychological aspects of adjustment to disability (e.g., anxiety, depression, posttraumatic stress disorder, etc.)
- Brief neuropsychological and neurocognitive assessment highlighting functional changes associated with various neurologic conditions, both acute and chronic
- Consultation and interdisciplinary work with medical providers including physicians, physicians in training, therapists, social workers, nurses, psychiatrists, etc.
- Pain management assessment and intervention
- Inpatient substance abuse evaluation and treatment
- Stress management
- Caregiver intervention and support

Substance Abuse

The VASLCHCS Substance Abuse Unit is in the process of significant transition. As the unit is re-designing its services and structure, interns will have an opportunity to train with at least four separate major rotation supervisors in both inpatient and outpatient settings, depending on the intern's preference. These supervisors can offer a number of training opportunities in outpatient and residential treatment, including: providing assessment and treatment planning, individual psychotherapy, and discharge planning. Interns also provide relapse prevention-based psychoeducational groups, administer psychological and neuropsychological assessments in response to consultation requests, and co-facilitate groups with other substance abuse staff (e.g., Seeking Safety, process groups, addiction maps, and recovery groups). Interns will also participate in multidisciplinary staff meetings in which Veterans are screened for admission, crisis interventions are discussed, and treatment plans are modified and updated. We expect that there will be separate rotations in outpatient substance abuse and also residential substance abuse.

Veterans Integration to Academic Leadership (VITAL)

In recognition of the fact that veterans face unique challenges and obstacles in the university setting, the VITAL program was established to aid student veterans on campus. The Veterans Integration to Academic Leadership initiative or VITAL program is committed to aiding student veterans in adjusting to the academic setting, helping veterans to overcome obstacles that might impede academic success, and supporting veterans in completing their educational goals. The VITAL program is specifically focused on connecting veterans to appropriate services on campus and within the VA system, providing education and training to faculty and staff about

veterans' needs in the academic setting, participating in outreach to student veterans and campus and community partners, and providing mental health treatment to veterans on campus.

The VITAL program is relatively new to the Salt Lake VA, and has been providing services to student veterans on campus at the University of Utah, Weber State, and Salt Lake Community College for almost two years. The experiences and opportunities available to interns through the VITAL program are quite broad and require a certain amount of flexibility. Interns in the VITAL program will be expected to participate in and help develop a variety of outreach and training events, and to carry a caseload of therapy and testing cases on campus. Outreach and training events range from tabling at events on campus to developing collaborative relationships with campus and community partners to presenting at state and national conferences. In addition to working with veterans with general mental health concerns, interns can also expect to provide empirically based treatment for PTSD, and to conduct testing for learning disabilities and ADHD. Opportunities for research, program development, and supervision are also available. All of the above mentioned experiences will be part of the rotation but are dependent on the referrals received and the opportunities available on campus during the rotation.

In addition to the unique setting and opportunity to work with primarily OIF/OEF veterans, interns will receive training related to educational benefits and community/campus resources available to student veterans. The intern can expect to develop skills in providing appropriate referrals to VA and community providers, enrolling veterans in the VA healthcare system, and developing collaborative relationships with community and campus partners.

MINOR ROTATIONS

Outpatient Psychotherapy

In keeping with the generalist emphasis, all interns will split their year with six-month rotations in psychotherapy and neuropsychological assessment. For the six-month psychotherapy rotation, interns will select the population or supervisor with whom they want to work. The outpatient psychotherapy rotation currently offers supervisors in the following settings: Posttraumatic Stress Disorder Clinical Team (PCT), Dialectical Behavioral Therapy, General Outpatient Mental Health, Health Care for Homeless Veterans (HCHV) – Critical Time Intervention Program (CTI), and Track B (Comorbid PTSD and Substance Abuse). Interns choose one of these. Supervisors in each of these tracks have expertise in different populations and treatment approaches. As such, interns have the opportunity to guide selection of their supervisor based on their preferences, professional goals, and/or "gaps" in training. For example, if an intern is looking to learn about Cognitive Processing Therapy, he/she may want to choose a supervisor on PCT. Moreover, if an intern seeks further treatment experience in depression and/or anxiety, he/she may decide to choose a supervisor in General Outpatient Mental Health. The experience of providing psychotherapy is obligatory, however the choice of which supervisor will supervise the experience is largely the intern's. The supervisor selection is done at the beginning of the training year, at the same time as the rotation selection.

Depending on the chosen area for the outpatient psychotherapy rotation, interns have the opportunity to assess and treat a variety of Axis I and II conditions in individual, couple, and/or group formats. Treatment modalities can include: Prolonged Exposure, Cognitive Processing

Therapy, Acceptance and Commitment Therapy, Dialectical Behavior Therapy, Social Skills Training, and Wellness Recovery Action Plans. Interns usually have a caseload of 5-10 Veterans, depending on their training needs and goals. All interns will receive exposure to various Evidence Based Psychotherapies as offered by Veterans Affairs, regardless of which evidence based therapies their individual supervisor offers.

Psychological Assessment

Psychological assessment is a cornerstone to the profession of psychology. In line with this belief, the six-month rotation focuses on building assessment skills. It is understood that trainees will arrive with a range of experiences in assessment. Please rest assured that we understand this and accept a wide range of intern abilities and experience in regards to psychological assessment. As a general minimum we expect that interns will have had graduate coursework in objective assessment and will have written three integrated assessment batteries. Beyond that, we willingly provide hands-on training. All interns will be trained in the administration, scoring, norming, and interpretation of various instruments. After an initial training period, which varies depending on the level of assessment experience within the intern cohort, interns are expected to be able to conduct weekly psychological assessments using a variety of common instruments. Assessments are frequently requested to assist medical and mental health providers with diagnostic questions and patient management issues. Common referral issues include questions about medical decision-making capacity, dementia vs. depression, cognitive disorders due to Traumatic Brain Injury or other medical conditions (e.g., multiple sclerosis, anoxia, and stroke) and differential diagnosis of psychiatric conditions.

All interns receive extensive didactic training in the administration, scoring, and interpretation of psychological instruments. Interns will also receive weekly individual supervision with an experienced psychologist. Supervision focuses on each aspect of the evaluation process, including referral information, presenting complaints, background history, interview and observations, testing and normative data, differential diagnosis, and recommended interventions. In addition to the individual supervision, interns participate in weekly group supervision. Interns present their cases and provide feedback to each other in the process. In addition to traditional assessment cases, interns have the opportunity to conduct transplant evaluations. The Psychology Service is responsible for conducting the mental health assessments of spinal cord stimulator candidates. Each intern should expect to administer several evaluations over the course of the rotation.

The VASLCHCS holds that interns need a full range of experience in providing assessment. In addition to the comprehensive neuropsychological batteries, interns will also have the experience of providing briefer assessments and recommendations (consultation) in a medical setting. This is conducted in the Geropsychology Assessment Clinic. In this interdisciplinary primary care setting, interns will: 1) triage new patients for referral into geriatric clinics, and 2) provide consultation to providers on a one-time basis. These clinics are staffed by a geriatrician and geriatric fellows, pharmacist, speech pathologist, social work intern, medical intern, and psychology intern. This is a unique opportunity for developing interdisciplinary skills, since each patient is seen by every member of the team for a brief evaluation. The team then meets to review findings and to develop recommendations. Each intern will rotate through this additional component for two months of the internship year. Although VASLCHCS Intern work-weeks are

typically 40-45 hours, during this period, interns can expect to increase at least to 45-55 hours during this two-month session. Dr. Turley makes every effort to schedule this component when competing demands are fewest (e.g., not during dissertation defense or opposite heavy rotations).

SUPERVISION

The VASLCHCS has over 40 doctoral level psychologists that are available as supervisors for the internship program. This constitutes a faculty/intern ratio of more than 8:1. All supervisors have regular and weekly times for supervision. All interns have at least two primary supervisors at any given time (Major and Minor Rotations); thus a *minimum* of two hours of face-to-face individual supervision is provided each week. In addition, interns receive at least two hours of training each week through other teaching activities: didactics, direct observation and feedback, modeling, group supervision, case review, co-treatment with a supervisor, team rounds, and “as needed” consultation (with supervisors, other psychology staff, and treatment team staff). On the medical psychology rotations, there is often a high level of “on the fly” supervision, care is quickly discussed, prior to moving onto the next patient in rounds. Finally, interns can expect to receive some limited supervision from the psychology postdoctoral fellows. For a look at our psychology staff and potential supervisors, please see the Staff Directory at the end of this document.

INTERN EVALUATION - Professional Competency Development

The VASLCHCS Psychology Internship provides training in following Core Competency domains:

Foundational Competencies

These competencies represent the knowledge, skills, attitudes, and values that serve as the foundation for the functions a psychologist is expected to carry out (how we do what we do).

- Relationships – the capacity to relate meaningfully and work effectively with individuals, groups, and/or communities.
- Ethical and Legal Standards – able to integrate ethical and legal standards into competent and professional interactions.
- Reflective Practice and Self-Assessment – reflective and professional practice conducted within the boundaries of competence, and commitment to lifelong learning, critical thinking, and the development of the profession.
- Scientific Knowledge and Methods – the ability to understand and integrate science into practice across domains (e.g., biological and cognitive bases of behavior, lifespan issues).
- Interdisciplinary Systems – identification, knowledge, and cooperative involvement with one’s colleagues and peers.
- Individual and Cultural Diversity – awareness and sensitivity in working professionally with diverse individuals, groups and communities who represent various cultural and personal backgrounds.

Functional Competencies

These competencies represent major functions that a psychologist is expected to carry out, each of which requires reflective integration of foundational competencies in problem identification and resolution (what we do).

- Assessment – assessment, diagnosis, and conceptualization of problems and issues associated with individuals, groups, and/or organizations.
- Intervention – interventions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations.
- Consultation – expert guidance or professional assistance in response to the needs/goals of individuals, groups, and/or organizations.
- Research/Evaluation – the generation of research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.
- Supervision/Teaching – supervision, training, and/or evaluation of the professional knowledge base.
- Leadership/Administration – managing the direct delivery of services (DDS) and/or the administration of organizations, programs, or agencies (OPA)

EVALUATIONS

Interns are formally evaluated in writing at the end of each rotation (six data points total, from two minor rotations and four major rotations). Having a minimum of at least six different supervisors, each intern gets a range of supervision experiences. Supervisors vary significantly based on their style, focus, methods, how focused they are on either process or content, and expectations. However, what is constant is our expectation that there should *not* be an element of surprise on a formal evaluation; an intern should be very aware of how he or she is doing on that rotation, prior to rotation's end. To facilitate ongoing evaluation and meet the training needs of the intern, the intern's performance is regularly discussed among the training supervisors at monthly training committee meetings.

Interns receive formal, written evaluations from their supervisors on the extent to which they are meeting internship requirements and performance expectations. The feedback addresses the intern's performance and progress in terms of professional conduct and psychological knowledge, skills, and awareness in the competencies for psychology. Additionally, interns meet individually with the Training Director at least monthly for informal check-ins. Mid-year, interns also receive a copy of the comprehensive evaluation letter sent to their training program. This letter includes a summation of their written evaluations, an indication if the intern is on track to completing internship, and whether or not any concerns or issues have been noted.

INTERNSHIP EXIT CRITERIA

Essentially, when we say an intern has completed a VASLCHCS internship, we are saying that they can function independently within their scope of competence and level of development for an entry-level psychologist in a healthcare setting. Exit Criteria is our minimum level of achievement and is as follows:

- 1) Completion of 2080 hours;
- 2) Must pass all rotations;
- 3) Must have Training Committee consensus that intern is at proficiency level of “Entry level psychologist” upon internship completion

INTERN FEEDBACK

At the end of the internship year, interns provide comprehensive verbal and written feedback to the training program as to what is working well and what needs to change. This is a lengthy process, driven by the individual intern cohort, and all aspects of the rotation are under review: rotations, supervisors, structure, orientation, etc. Initially results are presented to the training director at a retreat. This is followed by feedback to the rotation supervisors. Interns are coached and supported during this process. Ultimately, it is our expectation that interns will be able to provide constructive feedback directly to supervisors. The intent of this process is two-fold: 1) provide information to supervisors to improve the rotation, supervisor competency, and enhance the internship program; 2) provide an opportunity for intern professional development in giving feedback.

RESEARCH

The primary focus of the internship training program is the development of applied, clinical skills. However, interns may have the opportunity for *limited* participation in local research projects (e.g., the Mental Illness Research, Education, and Clinical Center [MIRECC], the Geriatric Research, Education, and Clinical Center [GRECC], and PTSD Clinic). Interns will only be permitted to engage in research, provided they have completed their dissertation or doctoral project. Additionally, please note that interns cannot be primary investigators on research projects, but must work under the auspices of full-time psychology staff. Recent and current research projects include:

- Healthcare utilization among rural populations when incentivized
- Telemedicine effectiveness and utilization among older veterans
- VA Cooperative Study investigating the use of Prazosin in the treatment of combat related PTSD
- Study of pain and employment in OEF/OIF polytrauma patients
- Interventions for dementia caregivers
- Study of mTBI and PTSD
- Osseointegration (prosthetics)

DIDACTICS AND SEMINARS

- *Psychology Didactics*. Weekly seminar conducted by psychology staff members, other disciplines from the medical center, and community professionals. Topics vary from year to year depending on programmatic issues and intern needs/interests.
- *Evidence-Based Treatments Seminar*. Throughout the year, all interns receive seminars on evidence-based treatments, which could include Acceptance and Commitment

Therapy (ACT), Cognitive Processing Therapy (CPT), Dialectical Behavior Therapy (DBT), Recovery focused treatments, Motivational Interviewing for Relapse Prevention (MI), Seeking Safety, Social Skills Training (SST), and Wellness Recovery Action Plans (WRAPS).

- *Intern Seminar Series.* Each intern gives a presentation to the full psychology department during the internship year.
- *Psycho-pharm. Didactics.* In the spirit of interdisciplinary care, the psychology interns and clinical pharmacists conduct weekly didactics to round out each other's knowledge of their specialties. These informal meetings feature a 45-minute discussion led by either a psychology intern or clinical pharmacist on a topic salient to the clinician. The topics are decided by the group at the onset of the year and have included topics such as: antipsychotics (pharm.), CBT-I (psyc.), drug testing (pharm.), motivational interviewing (psyc.), mood stabilizers (pharm.), etc. These meetings are popular among the interns due to the collegial nature of the group, the exposure to the specialty services of different disciplines, development of interdisciplinary approaches to work in a medical center, and the delicious breakfasts that accompany with the meetings.
- *MH Grand Rounds.* Monthly presentations from various mental health disciplines on relevant topics.
- *Salt Lake Area Collaborative Internship Training.* Interns from VASLCHCS, Utah State Hospital, Primary Children's Medical Center, and the University of Utah Neuropsychiatric Institute attend bimonthly didactics on a range of topics.
- *Regional Medical Education Center Conferences.* Throughout the year interns have the opportunity to attend these conferences at a low or no cost. Recent conferences have been facilitated by nationally renowned professionals and have included such topics as Psychopharmacology, Geriatric Evaluation and Treatment, and Suicide Risk Assessment.

STIPEND AND BENEFITS

Interns receive a yearly stipend, set by Veterans Affairs Office of Academic Affiliation, for Salt Lake this is currently \$23,974, which is paid in equal installments over 26 bi-weekly pay periods. In addition, as a government employee, interns are provided with a variety of benefits, including 10 paid holidays, 13 vacation and 13 sick days, and eligibility for health care benefits. We encourage interns to use their leave and begin developing a balanced life for themselves. Internship is a time to further establish good self-care, so that as psychologists-in-training, interns learn how to balance the personal and professional and be engaged in this profession for a life-time.

INTERN RESOURCES

Interns are afforded the same respect and access given to psychology staff. In the current environment of very limited space in Veterans Affairs Medical Centers, our leadership continues

to provide all psychology interns with *private offices* with personal computers, voicemail, email, and Internet access. Interns also have access to: the Computerized Patient Record System (CPRS), VA Medical Library, and secretarial services from a dedicated psychology administrative assistant, including appointment scheduling. Additionally, while on the assessment rotation, interns have their own assessment kit, which includes standard assessment batteries (e.g., WAIS, WMS, RCFT, etc). Interns do not have to share testing materials; each intern is given their own.

ACCREDITATION STATUS

The Commission on Accreditation of the American Psychological Association accredits the Psychology Internship Program. We have been continuously accredited by APA since 1979. We had our site visit February 2013. For information regarding APA accreditation of this or other accredited internships please contact the Commission on Accreditation (CoA):

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE
Washington, DC 20002-4242
Phone: (202) 336-5979
Email: apaaccred@apa.org
www.apa.org/ed/accreditation

The Psychology Internship Program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and abides by all APPIC guidelines regarding intern recruitment and notification procedures. We agree to follow the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

COMMITMENT TO DIVERSITY

The VASLCHCS Psychology Service makes efforts to recruit and maintain a diverse psychology staff in a geographic region with limited ethnic and racial diversity. As such, the Internship Program places a high value on attracting a diverse group of interns and on maintaining an awareness of diversity issues during the internship year. The program appreciates the fact that attracting a diverse group of interns is important, not only for the internship, but for the staff as well.

APPLICANT QUALIFICATIONS

- United States Citizen (per VA Policy)
- Enrolled in an APA accredited Clinical or Counseling Psychology Doctoral Program. We accept both Clinical and Counseling psychology students pursuing either a Ph.D. or Psy.D., no differentiation is made among degree type. Appropriately trained APA accredited respecialization students are also acceptable
- Minimum of 400 Intervention and 100 Assessment hours.
- Completion of all required coursework and qualifying examinations by start of internship. Although completion of the dissertation is not required, intern applicants who have completed their dissertation proposals are given first consideration.

APPLICATION PROCEDURES

Submit the [APPIC Online APPI](#) no later than 12:00 Noon (MST) on November 4, 2015.

- In the cover letter, please describe your particular interests in our training program and rotations of interest. Interview dates will likely be Fridays and Mondays in January.
- Include three letters of recommendation, one of which should be from a person outside your psychology department. This is not meant to be a barrier for applicants, simply an external source for reviewers. Should this be problematic, feel free to contact Dr. Turley.

APPLICATION PROCESS

Only completed AAPI submissions received by **12:00 Noon (MST) November 4, 2015** will be considered. Applications are initially screened by the training director and then reviewed the selection committee. Independent file review is based upon educational experiences, training program quality, intervention/assessment experiences, essay responses, and letters of recommendation. After a combined average score is calculated, the selection committee meets to address and discuss significant discrepancies in scores and determines the cut-off score needed to participate in the interview process. All applicants will be notified whether or not they remain under consideration by December 11, 2014. (*Work sample no longer required.*)

Qualified applicants are invited to interview in person. We have tentatively scheduled the days for January 8, 11, and 15, 2016. During the interview day, two members of the training committee meet with the applicants for a formal interview. Applicants also meet with current interns (without staff), tour the facility, and have the opportunity to meet other supervisors. Telephone interviews are given to those unable to attend. However, we *strongly* recommended that applicants take this opportunity to attend and personally evaluate whether the SLCVA Psychology Internship Program is a "good fit" for them.

Interns are considered federal employees. Therefore, interns must meet all federal employee requirements, including a background check, pre-employment physical examination, and drug screening. Other branches of the federal government may also conduct routine background checks at their discretion as well. Official hiring is contingent on meeting all of these federal requirements.

ABOUT SALT LAKE CITY AND UTAH

According to the 2012 census, Salt Lake City has a population of 189,000. The surrounding metropolitan area has over 2 million people. Individuals unfamiliar with Salt Lake City and the state of Utah are often quite surprised at the wealth and variety of things to do and see. Salt Lake City is a montage of modern high-rises, commercial centers, unique sightseeing attractions, classic buildings, historic sites, excellent restaurants, and beautiful shopping malls. The city is also home to acclaimed ballet dance companies, the Utah Opera Company, many fine art galleries, and historical and art museums. Professional sports fans enjoy cheering for the Utah Jazz, Utah Grizzlies, Real Salt Lake, and Salt Lake Bees. Finally, fans of college sports will find one of the NCAA's most entertaining and bitter rivalries between the Brigham Young University Cougars and the University of Utah Utes.

For the outdoor recreational enthusiast, Utah is truly a paradise. During the winter months, Utah has "The Greatest Snow on Earth." Eleven resorts are within an hour drive of Salt Lake City. During the summer months, Utahans take advantage of over 1,000 lakes, rivers and streams. Sailing, wind surfing, kayaking, rock climbing and mountain biking are extremely popular during the warmer months as well. Utah has five national parks: Arches National Park, Bryce Canyon National Park, Canyonlands National Park, Capitol Reef National Park, and Zion National Park. We're also a short drive to Yellowstone and Teton National Park.



TRAINING STAFF

Below is a brief biography for each of our supervisory psychologists. We have tried to provide a sense of our staff without veering too closely to a match.com ad—you be the judge. Further, we encourage you to contact staff members only if you have a *specific* question for them. Out of respect for our staff's time, please direct *all* general inquiries to Dr. Turley.

Dennis "Aaron" Ahern, Ph.D.

Rotation Supervised: Major Rotation: VITAL (Veterans Integration to Academic Leadership)

Training Background: PhD, Combined Clinical, Counseling, and School Psychology Utah State University

Doctoral Internship: University of Utah Neuropsychiatric Institute

Areas of Interest/Expertise: Student veterans, Educational benefits, Evidence-based Treatments for PTSD (Prolonged Exposure and EMDR); Cross cultural clinical work (specifically with Latino populations), Program development, Treatment outcome research.

Fun Facts: Being a dad to two young children takes up most of my free time, but when I get the time I enjoy listening to music, dancing, playing soccer and basketball, and running.

Email: dennis.ahern@va.gov

James Asbrand, Ph.D.

Rotation Supervised: Minor in Outpatient Psychotherapy – PTSD Clinical Team

Training Background: Ph.D., Clinical Psychology - University of Utah

Doctoral Internship: Brigham Young University Counseling Center

Areas of interest/expertise: PTSD, Military Sexual Trauma, Diversity as related to therapeutic relationship.

Email: James.Asbrand@va.gov

Thomas R. Aikins, Ph.D.

Rotation supervised: Minor in Outpatient Psychotherapy – General Mental Health

Training Background: Ph.D., Counseling/Clinical Psychology – University of Utah

Doctoral Internship – VA Salt Lake City Health Care System

Areas of Interest/Expertise: Affective Disorders, PTSD, Chronic Pain, Former Prisoners of War, and Couples Communication/Marital Therapy.

Fun Facts: Psychology does not define me. I am a full-time grandfather to nine budding personalities. I am an avid cyclist, mostly in the warmer months. I am also likely to introduce myself as a landscape artist (oils), since this is also a major love of mine [we all know that reaction we get when we introduce ourselves as "Psychologist"]. I have my own studio, website, and galleries where my work can be seen and hopefully sold. I have been fortunate to paint in multiple foreign countries and the "travel bug" could easily overwhelm my bank account.

Email: thomas.aikins@va.gov

Steve Allen, Ph.D.

Rotation Supervised: Minor in Outpatient Psychotherapy – PTSD Clinical Team

Training Background: Ph.D., Clinical Psychology – University of Wyoming

Doctoral Internship – Martinez VA

Areas of Interest/Expertise: Treatment of PTSD and psychological assessment; community outreach and education, including law enforcement and clergy; process oriented group psychotherapy; development of psychology professionals.

Email: steven.allen@va.gov

Tracy Black, Ph.D.

Rotation supervised: Major in Mental Health Consult

Training background: Ph.D., Utah State University

Doctoral Internship – VA Salt Lake City Health Care System

Postdoctoral Fellowship – Roswell Park Cancer Institute

Areas of Interest/Expertise: Health psychology, psychosocial oncology, bereavement, and health behavior change.

Fun facts: As a mother of 2 young girls, most of my free time is spent pursuing activities that would interest most kids such as riding scooters, playing dress-up, and board games. I'm also really good at jump rope.

Email: tracy.black-cecchini@va.gov

Jacek Brewczynski, PhD

Rotation supervised: Minor in Psychotherapy—Track B at SAR RTP

Training background: PhD, Clinical Psychology – University of Detroit

Predoctoral Internship – Tampa VAMC

Postdoctoral Fellowship – PTSD & Polytrauma, VA SLCHCS

Areas of Interest/Expertise: Psychological interventions for veterans with co-morbid diagnoses of SUD & PTSD; psychological & neuropsychological assessment, including personality assessment; transpersonal interventions, such as mindfulness & meditation-based.

Fun facts: I own a keyboard, a set of martial arts weapons, and a subscription to Netflix.

Email: jacek.brewczynski@va.gov

Candice Daniel, Ph.D.

Rotation supervised: Major in Geropsychology (Home-Based Primary Care)

Training background: Ph.D., Clinical Psychology – University of Wyoming

Doctoral Internship – VA Salt Lake City Health Care System

Postdoctoral Fellowship – Geriatrics Research, Education, and Clinical Center, VA Salt Lake City Health Care System

Areas of Interest/Expertise: Medical regimen adherence among older adults, behavioral health interventions, motivational interviewing, capacity assessment, and dementia assessment.

Fun facts: I'm Salt Lake City's biggest fan. I love the ease of access to outdoor activities, walkable neighborhoods, and growing food scene!

Email: candice.daniel@va.gov

Christina Derbidge, Ph.D.

Rotation Supervised: Major in Rehabilitation Psychology – University of Utah
Training Background: Ph.D., Clinical Psychology – University of Washington
Doctoral Internship – VA Salt Lake City Health Care System
Postdoctoral Fellowship – VA Salt Lake City Health Care System

Areas of Interest/Expertise: Rehabilitation psychology, adjustment to disability, psychological aspects of chronic illness and neurologic conditions (e.g., spinal cord injury, stroke, TBI, etc.), (Dr. Derbidge continued)

hospital based inpatient and outpatient consultation/psychological interventions, neuropsychological assessment, evaluation and treatment of somatoform/conversion disorders, and family/caregiver intervention. I also have specialty training in personality disorders, suicide prevention, Motivational Interviewing, and third wave interventions (e.g., Dialectical Behavior Therapy, Acceptance and Commitment Therapy, Functional Analytic Psychotherapy). My research interests relate to biopsychosocial factors influencing emotional dysregulation, adjustment to disability, and health outcomes.

Fun Facts: I have a lot of normal interests, but the more unusual one is my dedication to science fiction. Books, TV, you name it!

E-mail: christina.derbidge@hsc.utah.edu

Marie R. Ehrler, Ph.D.

Rotation supervised: Minor in Outpatient Psychotherapy – PTSD Clinical Team

Training Background: Ph.D., Clinical Psychology, Palo Alto University
Post-doctoral Residency: University of Utah Brain Institute, Cognitive Neuroimaging Lab
Pre-doctoral Internship: VA Salt Lake City Health Care System

Areas of Interest/Expertise: Cognitive Processing Therapy & Prolonged Exposure for combat related PTSD and MST; Neurocognitive assessment of acute and chronic brain disease; and neurobiological bases of behavior associated with psychiatric disturbance and substance abuse (marijuana and methamphetamine)

Fun Facts: I'm a California native and chose to relocate to Utah for several reasons: to avoid the giant cities and high cost of living associated with California, yet remain close to the West Coast; and because Utah has some of the absolute best outdoor recreation activities available. I like to ski as often as I can, hit golf balls to release tension, play disc golf in the mountains while drinking beer and sangria with friends, and am gaining interest in rappelling as a means to access the extraordinary landscapes of Utah that are otherwise unreachable. I also enjoy nerding-out with my PlayStation 4 or Nintendo 3-D after a long hard day at work.

E-mail: Marie.Ehrler@va.gov

Bret Hicken, Ph.D.

Rotation supervised: Major in Geropsychology (Geriatric Primary Care Clinics)

Training background: Ph.D., Clinical Psychology – Univ. of Alabama at Birmingham

Doctoral Internship – VA Salt Lake City Health Care System

Postdoctoral Fellowship – Geriatrics Research, Education, and Clinical Center, VA Salt Lake City Health Care System

Areas of Interest/Expertise: Geropsychology, Capacity evaluation, Dementia Assessment & Treatment, Rural health, Caregiver support.

Fun facts: I enjoy gardening, cycling, snowshoeing, and music.

Email: bret.hicken@va.gov

Kay Koellner, Ph.D.

Rotation Supervised: Major rotations in both Pain Medicine and Palliative Care

Training Background: Ph.D., Clinical Psychology – Texas Tech University

Doctoral Internship – VA Salt Lake City VA Health Care System

Areas of Interest/Expertise: Palliative Care/End of Life Care, Medical Decision Making, Consultation/Liaison in Medical Settings, Management of Chronic Medical Illness, Chronic Pain, Caregiver Issues, Acceptance as a critical variable in adaptation to change – especially related to health issues, Psychopharmacology

Fun facts: My favorite “mindfulness” activities are Pilates and high performance driving.

Email: kay.koellner@va.gov

Jinna Lee, Ph.D.

Rotation supervised: Minor in Outpatient Psychotherapy – PTSD Clinical Team

Training Background: Ph.D., Counseling Psychology – University of Utah

Doctoral Internship – VA Salt Lake City Health Care System

Areas of Interest/Expertise: PTSD, anger management, nightmare management, insomnia, couples counseling, veterans of color, minority stress, race and racism

Fun Facts: Before becoming a psychologist, I worked in documentary filmmaking and studied popular culture. I still obsess about movies, music, and television shows every now and then (okay, maybe a little more than that). When not working, I keep busy trying to cook healthy meals for my two young daughters and pretending I’m going to work out. My current project is fighting the culture of perfectionism!

Email: jinna.lee@va.gov

Justin J. MacKenzie, Ph.D.

Rotation Supervised: Major in Rehabilitation Psychology – University of Utah

Training Background: Ph.D., Clinical Psychology (Health) – University of Utah

Doctoral Internship – VA Salt Lake City Health Care System

Postdoctoral Fellowship – University of Utah

Areas of Interest/Expertise: Rehabilitation psychology, adjustment to disability, psychological aspects of chronic illness and neurologic conditions (e.g., spinal cord injury, stroke, traumatic brain injury, etc.), hospital based inpatient and outpatient consultation/psychological interventions, neuropsychological assessment, evaluation and treatment of somatoform &

(Dr. MacKenzie continued)

conversion disorders, family/caregiver interventions, and pre-surgical bariatric surgery evaluation. I also have a variety of research interests including the impact of interpersonal relationships and social connections on adjustment to disability and health outcomes.

Fun Facts: In a former life I had the opportunity to moonlight as a musician; playing and touring in various states across the United States.

E-mail: justin.mackenzie@hsc.utah.edu

Janet G. Madsen, Ph.D.

Rotation supervised: Minor in Psychological Assessment

Training Background: Ph.D., University of Utah

Doctoral Internship – VA Salt Lake City Health Care System

Areas of Interest/Expertise: Neuropsychological Assessment, Evaluation for Transplant, Health Psychology

Fun Facts: I have a large family of adult children and 14 grandchildren (so far) and two geriatric cats. I love baroque music and the local culture.

Email: janet.madsen@va.gov

Jo Merrill, Ph.D.

Rotation supervised: Major in Outpatient Psychotherapy – PTSD

Training Background: Ph.D., Counseling Psychology – University of Utah

Doctoral Internship – VA Salt Lake City Health Care System

Areas of Interest/Expertise: PTSD, insomnia, tele-mental health, aging, grief, LGBTQ veterans

Fun Facts: I love Utah and can't seem to move away for long. I left graduate school in history for graduate school in psychology. I'm trying to figure out the whole parenthood thing and in the meantime miss my dogs and books.

E-mail: tiffany.merrill@va.gov

Patrick J. Miller, Ph.D.

Rotation Supervised: Minor in Psychological Assessment

Training Background: Ph.D., Clinical Psychology – Washington State University

Doctoral Internship – VA Salt Lake City Health Care System

Areas of Interest/Expertise: Geropsychology, Cognitive Disorders, Neuropsychology, Ethics in Health Care, Administration of Mental Health Programs and Interdisciplinary Teams.

(Dr. Miller continued)

Tidbit of Interest: Dr. Miller is the current Chief of Psychology

Email: patrick.miller@va.gov

Tom Mullin, Ph.D.

Rotation Supervised: Minor in Outpatient Psychotherapy – PTSD Clinical Team

Training Background: Ph.D., Counseling Psychology – University of Utah

Doctoral Internship – VA Salt Lake City Health Care System

Areas of Interest/Expertise: PTSD, readjustment after OEF/OIF deployment, psychological assessment, evidence-based treatment for PTSD, Veteran outreach programs, Training.

Fun Facts: I am mostly from Idaho, where I grew up and completed my undergraduate training. I never intended to stay in Utah after completing graduate school, but I think that Salt Lake City has a way of keeping people. I also enjoy good food but I have had more kitchen disasters than I care to state. I have an excellent food-to-event memory where I can often recall what I ate, more than what actually happened. I do not think there is a memory subtest that measures this yet.

Email: thomas.mullin2@va.gov

Paul D. Murdock Psy.D.

Rotation Supervised: Minor in Outpatient Psychotherapy—DBT

Training Background: PsyD, Clinical Psychology –Indiana State University

Internship: Colorado Mental Health Institute at Fort Logan

Areas of Interest: Personality Disorders, forensic psychology, couples counseling, and posttraumatic growth

Fun Facts: I was born and raised in Canada. I have 4 children and spend my free time enjoying a wide range of outdoor activities (swim, bike, run). I am an entrepreneur and teacher at heart; I have a private practice, teach part-time and am unable to stop pursuing other business ventures.

E-mail: Paul.Murdock@va.gov

Heather Pierson, Ph.D.

Rotation Supervised: Major in Services for Outpatient Addiction Recovery (SOAR)

Training Background: PhD, Clinical Psychology – University of Nevada, Reno

Doctoral Internship – VA Puget Sound Health Care System, Seattle

Postdoctoral Fellowship (6.5 months completed) – Palo Alto VA HCS

Substance use disorder/Homelessness

Areas of Interest/Expertise: Motivational Interviewing, Acceptance and Commitment Therapy, Mindfulness-Based Relapse Prevention, CBT Relapse Prevention, Co-occurring SUD and MH treatment, team development, program development.

Fun Facts: Where to begin... I like to camp, hike, swim, and generally enjoy the sun. (I'm still not recovered from Seattle weather). Most of my time outside work is spent with my young son and husband. We have been trying our hands at gardening with interesting, mixed results. I love watching my son explore new things and joining him in a fresh curiosity about the workings of the world. I also enjoy reading, trying my hand at new recipes, eating, spending time with friends, and, when I get the chance, travelling.

Email: Heather.Pierson@va.gov

Taylor Plumb, Psy.D.

Rotation Supervised: Minor in Outpatient Psychotherapy – PTSD Clinical Team

Training Background: Psy.D., Clinical Psychology – California School of Professional

Psychology – San Francisco

Doctoral Internship – VA Salt Lake City Health Care System

Postdoctoral Fellowship – PTSD & Polytrauma, VA Salt Lake City

Health Care System

Areas of Interest/Expertise: PTSD, Trauma Related Sleep Disturbances, TBI and Polytrauma, Neuropsychology, OEF & OIF Readjustment, Evidenced Based Therapies for PTSD

Email: taylor.plumb@va.gov

Gita Rakhsha, Ph.D.

Rotation Supervised: Minor in Outpatient Psychotherapy – PTSD Clinical Team

Training Background: Ph.D., Counseling Psychology – University of Utah

Doctoral Internship – University of Utah Counseling Center

Areas of Interest/Expertise: Trauma-focused therapies, Self psychology, Cross-cultural psychology, Geriatric psychology, Suicidology.

Fun Facts: Although not based on any scientific research, I can say with a 99 percent certainty that Utah is the only place on earth where you can ski, play tennis, and swim, all on the same day. We have the greatest weather and landscape here.

E-mail: gita.rakhsha@va.gov

Renn Upchurch Sweeney, Ph.D.

Rotation Supervised: Major in Primary Care/Behavioral Health Service

Training Background: Ph.D., Clinical Psychology – University of Utah

Doctoral Internship – VA Salt Lake City Health Care System

Postdoctoral Fellowship in Medical Psychology – Memphis VA Health Care System

Areas of Interest/Expertise: Primary Care Psychology, Integrative Healthcare, Stress and Coping with Chronic Illness
Fun Facts: My son, Trey, was born in October 2011, so my husband and I are spending most of our time learning how to be parents and trying to keep up with our little one. We also enjoy taking care of our two cats and very energetic Australian Shepherd, Huckleberry. In our daily efforts to entertain Trey and exhaust Huck, we often find ourselves hiking and mountain biking. As many others in Utah, I enjoy the outdoors and the recreation that the area has to offer. I consider myself extremely lucky to be able to spend my winter weekends skiing in "the greatest snow on earth." The more time that I have spent in Utah, the more I have come to appreciate the beautiful scenery that surrounds us daily. I have taken up amateur photography in an effort capture some of these special places and memories (and to take baby photographs of course!). Finally, I love to cook and am an avid gardener.

Email: caroline.sweeney@va.gov

Michael Tragakis, Ph.D.

Rotation Supervised: Minor in Outpatient Psychotherapy – General Mental Health

Training Background: Ph.D., Clinical Psychology – University of Utah

Doctoral Internship – VA Salt Lake City Health Care System

Areas of Interest/Expertise: Psychotherapy with PDs and SMI (Dialectical Behavior Therapy and Social Skills Training for Schizophrenia/SMI), group psychotherapy (interpersonal process and psychoeducation groups), recovery orientation in mental health care (strengths-based treatment planning, psychosocial rehabilitation and using consumer/peer support).

Fun Fact: My two favorite places in the world are Glacier National Park in Montana and Prague, the Czech Republic.

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Sarah Turley, Ph.D.

Rotation Supervised: Major in Physical Medicine & Rehabilitation

Training Background: PhD, Counseling Psychology – Southern Illinois University

Doctoral Internship – Long Beach VA Healthcare System

Areas of Interest/Expertise: ACT, Behavioral Medicine, Medical Decision-Making, Palliative Care, Ethics, Brief Treatment, and enhancing quality of life for patients.

Random Thoughts: Life is pretty short and this is a ‘learning planet,’ so every day I do two things: learn something new and have some fun. Also, you know when you’re in the right profession when you’d do it for free—I love my job.

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Alethea Varra, Ph.D.

Rotation Supervised: Major in Health Promotion Disease Prevention/ Patient Centered Care and Cultural Transformation

Training Background: PhD, Clinical Psychology – University of Nevada, Reno

Doctoral Internship – VA Puget Sound Health Care System, Seattle

Postdoctoral Fellowship – MIRECC Fellowship in PTSD, VAPSHCS

Areas of Interest/Expertise: Motivational Interviewing, Acceptance and Commitment Therapy, smoking cessation, chronic illness self-management, clinician coaching, organizational change.

Fun Facts: I grew up on a ranch in Texas. I spend most of my time either chasing around my two fabulous children or reading. I love good wine and good friends and enjoy participating in sporting events that I have no business being at (triathlons, obstacle runs, etc).

Email: Alethea.Varra@va.gov

Edward M. Varra, Ph.D.

Rotation supervised: Minor in Outpatient Psychotherapy – General Mental Health

Training Background: Ph.D., Clinical Psychology – Saint Louis University

Doctoral Internship – Albany Psychology Internship Consortium

Post-doctoral Fellowship – Traumatic Stress Institute/ Center for Adult and Adolescent Psychotherapy

Areas of Interest/Expertise: PTSD, Mindfulness-based psychotherapy, clinical supervision and professional development.

Fun Facts: Being relatively new to Utah (2012) I am enjoying exploring the area. My time has been spent cooking, hiking, running, and attempting to learn to ski.

Email: edward.varra@va.gov

Richard A. Weaver, Ph.D.

Rotation Supervised: Major in Inpatient Psychiatry Unit

Training Background: Ph.D., Clinical Psychology – Brigham Young University

Doctoral Internship – Timpanogos Community Mental Health Center

Areas of Interest/Expertise: Inpatient psychiatry; working with a broad-spectrum of acute and chronically mentally ill patients; computer applications; psycho-educational approaches.

Email: richard.weaver@va.gov

Harrison Weinstein, Ph.D.

Rotation Supervised: Major - Polytrauma Clinic & Veteran's Caregiver Program

Training Background: Ph.D., Clinical Psychology – Palo Alto University

Doctoral Internship – Southern Arizona VA Health Care System

Postdoctoral Fellowship – PTSD & Polytrauma, VA Salt Lake City VA

Areas of Interest/Expertise: PTSD, TBI and polytrauma, evidenced based therapies for PTSD, tele-mental health, response bias and effort.

Fun facts: Outdoor enthusiast – I spend all of my free time skiing (Utah best in world), canyoneering (Utah best in world), and scuba diving (Utah not best in world, but happy just blowing bubbles). I love to travel, perpetually hoarding leave for next adventure – I currently have my sights set on Chuuk Lagoon.

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Brandon A. Yabko, Ph.D.

Rotation supervised: Minor in Outpatient Psychotherapy – PTSD Track

Training Background: Ph.D., Counseling – Arizona State University

Doctoral Internship – Southern Arizona VA Health Care System

Postdoctoral Fellowship – VA Salt Lake City Health Care System

Areas of Interest/Expertise: PTSD, Affective Disorders, Anxiety Disorders, Chronic Pain, Third-Wave interventions (i.e., Acceptance and Commitment Therapy and mindfulness-based interventions), EMDR, Yogatherapy, Posttraumatic Growth. I am a Rogerian/interpersonal therapist who utilizes the wonderful opportunities for intervention within the context of the

(Dr. Yabko continued)

therapeutic relationship. However, my theoretical orientation drives the process of therapy while utilizing Evidenced Based Therapies (EBTs), such as PE, CPT, EMDR, ACT, and mindfulness.

Fun Facts: I am very passionate and enthusiastic about my work with Veterans and at the same time I work hard in maintaining a strong work-life balance that helps me be present in all areas of my life. I enjoy snowboarding, mountain biking, crossfit, hiking...pretty much anything outdoors...hanging out with my wife and our two wonderful dogs, brewing beer, making/eating sushi, and maintaining a personal yoga/mindfulness practice.

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FAQ about Salt Lake City VA

(Intended to address the common questions and concerns people have about life in Utah/SLCVA, answered by Dr. Turley and is solely her opinion)

Q. I am _____ (anything other than Euro-American, LDS, heterosexual, etc). How well will I fit in? Will I be comfortable living in Salt Lake City?

A. We find that most people are *very* pleasantly surprised by the actual life in Salt Lake City and the State of Utah. We'd encourage you to leave any stereotypes behind and come experience it for yourself. If you'll notice from our bios, most people come (not with the intention of staying) and then choosing to stay, in large part due to the high quality of life Utah offers.

Q. How many hours do interns end up working on internship?

A. Most interns keep their hours between 42 and 45 hours a week. There is an increase while interns are on the geriatric assessment rotation which lasts 8 weeks. Dr. Turley works very hard to make sure that this is scheduled opposite the rotation with the fewest competing demands.

Q. I hear horror stories about interns being overworked and not taking vacations. Will I have to cover holidays?

A. Here, you're actually encouraged to take all your leave time which adds up to almost one full-month off over the 12-month internship. Our staff does too. We encourage trainees to learn how to balance a full, rich life that includes work and a personal life. Interns are never used for clinical coverage as they're not LIPs – they're trainees. If all of my fellows want to be off on a certain holiday, all are off. Past trainees have often remarked that the SLCVA is in the minority regarding our openness and support for families (e.g., pregnancy, childcare, caregiving, etc). We have a federal childcare program on station that is subsidized depending on your household income.

Q. I want to stay involved in research while on internship, how does SLCVA support that?

A. I'll be honest with you, lots of interns come to us with that goal although fewer follow-through on that. Reasons for that: a) you have to finish your dissertation first, I don't allow other research until an intern has successfully defended; b) after an intern finishes their dissertation, they often become enchanted with that thing called 'life' such that research takes a temporary back seat. I fully support your right to read books for pleasure, to watch bad television, discover new/old hobbies, re-engage with people you love, or anything else that matters to you; c) we consider internship a clinical experience first and often there are more

things an intern wants to do than they have time for; d) it's unrealistic to believe an intern could be a PI on a VA research project – the timeline to get a project through and pass an IRB and collect data within 12 months is not reasonable. Know that you are able to work with any faculty here on existing projects. All this being said, I've had incredibly research-minded interns who publish several articles and book chapters while on internship.

Q. Do interns really get the rotations they want?

A. Yes, they do. If/when an intern has had to compromise their choices, it is often not getting the rotation *order* that they want. At the end of the year, most interns would say that things worked out well or better than they expected. I repeat frequently, you will get everything you need and *most* of what you want.

Q. Where do interns go after a SLCVA internship?

A. Wherever it is they want to go. Seriously, most interns are getting either their first or second choice position after internship. We also consider it a program success to help interns achieve their non-professional goals in life, such as going part-time so they can be the more stay-at-home parent, or taking time off from psychology to be a stay-at home parent. Our ideas of what is 'success' is defined by the intern; we'll help you get wherever it is you want to go.

Q. Are you really open to Counseling Psychology students?

A. Yes, very much so. We do not differentiate between a counseling and a clinical psychology applicant (please see our bios). We do very much look at the actual preparation a person has had.

Q. I'm from a professional school, do I have a chance of being considered?

A. Yes, very much so. Again, we look very carefully at the applicant's preparation. We do consider the APA accreditation status of an applicant's graduate program, the school's match rate, and EPPP pass rate – we do this for all applicants we review, not just professional schools. Again, read our bios and notice that we have attending psychology staff representing the spectrum of training programs.

Q. So what are you looking for in an applicant? I'm not sure I'd be competitive enough.

A. If you read our materials and feel that SLCVA would be a good fit for your career goals, you meet our minimum guidelines, and have good solid training in psychology, then please apply. In our experience, we have found that some things do not differentiate among applicants (i.e., the number of hours one has, the type of school they're from, the type of program they're from, traditional vs. non-traditional age students, etc). You need not have had experience in all the areas we offer to be fully considered. We are looking for people who genuinely want to be at our site, who can benefit from the training we offer, and will bring their experiences with them. We are looking for psychologically mature individuals who are truly open to developing themselves further.

Q. I don't have VA experience, should I apply?

A. I think by and large, VAs look favorably on prior VA training experience. The VA operates as a very complex system and we recognize that it takes time to learn how the system works. However, every year the SLCVA takes interns who have not had any VA experience and they do

just fine. Often we encourage them to have their first rotation be in an area they have some prior experience in to make the transition easier.

Q. What happened to the PTSD rotations? It doesn't look like you offer training there.

A. This is incorrect, we do offer in-depth training in PTSD. PTSD is no longer offered as a stand-alone *major* rotation, it is however a six-month minor rotation. A few years ago, it became apparent to us that we needed to revamp how we offered PTSD training. When it was a major rotation, interns were unable to complete EBT training (e.g., CPT, PE) in a 12-week rotation. Their experience was limited to doing intakes and sitting in on groups and missing a key component of VA training: experience providing EBT therapies. So now interns provide treatment for PTSD across a 6-month minor rotation in psychotherapy. They are able to get patients through full EBT protocols, in addition to doing intakes, group therapy, and team consultation.

Q. All VA internships are the same, aren't they?

A. Maybe on paper we look very similar, but I don't believe that's true. I think there are differences among VA sites and the best way to appreciate if a site is a good fit for you is to do an in-person visit. I can appreciate the financial considerations of that advice and think most applicants would do better to visit fewer places one is truly interested in than seeing all places an intern receives an invitation from. These are just my thoughts (ST).

Q. Why should I consider the SLCVA for internship?

A. Interns have private offices here (there are SLCVA staff that share offices, but interns still get their own space), your own testing materials while on the assessment rotation, we cultivate a supportive training environment, you get to pick your own rotations, the training staff genuinely enjoy training, and how many VA sites offer an intern the opportunity to be on a ski chair-lift within 30 minutes of leaving the VA? One final thing that differentiates us is our focus on professional development and helping interns become the best psychologist version of themselves (not copies of us). You're clearly not coming to internship for the money (\$23K), what you do get here is feedback, real feedback from people who have your professional development at heart.

Thank you for your interest in our internship program and we truly wish you the very best during this exciting (and possibly anxiety-provoking) time. Best, Dr. Turley